

PUBLIC VOUCHER FOR PURCHASES AND  
SERVICES OTHER THAN PERSONAL

D. O. Vou. No. \_\_\_\_\_  
Bu. Vou. No. \_\_\_\_\_  
435

U. S. \_\_\_\_\_  
(Department, bureau, or establishment)

Voucher prepared at \_\_\_\_\_  
(Give place and date)

THE UNITED STATES, Dr., \_\_\_\_\_  
Payee's Account No. \_\_\_\_\_

To \_\_\_\_\_  
(Payee)

PAID BY

SAPC 9844  
COPY 1 OF 2

| No. and Date of Order                  | Date of Delivery or Service | ARTICLES OR SERVICES<br>(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)<br><br>Discount Terms | QUANTITY | UNIT PRICE |     | AMOUNT  |      |
|--|-----------------------------|---|----------|------------|-----|---------|------|
|  |                             |   |          | Cost       | Per | Dollars | Cts. |
|  |                             | Costs   |          |            |     | (811    | 09)  |
| Use continuation sheet(s) if necessary |                             |   |          |            |     |         |      |

PAYMENT:  
Complete ☐  
Partial ☐  
Final ☐

Shipped from \_\_\_\_\_ to \_\_\_\_\_ Weight \_\_\_\_\_ Government B/L No. \_\_\_\_\_ Total (\$811 09)

I certify that the above bill is correct and just and that payment has not been received.

STATINTL

(Sign original only)

Date 10/22/56  
By \_\_\_\_\_  
Title \_\_\_\_\_

STATINTL

(Payee must NOT use this space)

Differences \_\_\_\_\_

Amount verified; correct for  
(Signature or initials) \_\_\_\_\_

(811 09)

Contract No. A101 Date \_\_\_\_\_ Req. No. \_\_\_\_\_ Date \_\_\_\_\_ Invoice Rec'd. \_\_\_\_\_

Pursuant to authority vested in me, I certify that this account is correct and proper for payment.

Approved for \$ \_\_\_\_\_  
By \_\_\_\_\_  
APPROVING OFFICER

SIGN  
ORIGINAL  
ONLY

10/22/56  
Title \_\_\_\_\_  
Date \_\_\_\_\_  
CONTRACTING OFFICER

Title \_\_\_\_\_

THE REVERSE OF THIS FORM MUST BE EXECUTED WHEN PURCHASES ARE MADE OR SERVICES SECURED WITHOUT WRITTEN AGREEMENT IN ANY FORM

ACCOUNTING CLASSIFICATION (Appropriation Symbol must be shown; other classification optional)

STATINTL

STATINTL STATINTL

Paid by { Check No. \_\_\_\_\_ dated \_\_\_\_\_, 19\_\_\_\_, for \$ \_\_\_\_\_ on Treasurer of the United States in favor of payee named above.  
Cash, \$ \_\_\_\_\_, on \_\_\_\_\_, 19\_\_\_\_ Payee \_\_\_\_\_

U. S. COST REIMBURSABLE Sheet No. 1 of Bureau Voucher No. 435  
(Department, bureau, or establishment)

STATINTL  
STATINTL